| Sl. No. | State/UT | 1998 | 1999 | 2000 (upto Dec.) |
|---|---|---|---|---|
| 26. | Pondicherry | 18 | 71 | — |
| 27. | Rajasthan | — | — | — |
| 28. | Sikkim | — | 1 | — |
| 29. | Tamil Nadu | 2 | — | 119 |
| 30. | Tripura | — | — | — |
| 31. | Uttar Pradesh | — | — | 4 |
| 32. | West Bengal | — | — | — |
| | TOTAL: | 185 | 149 | 358 |

**Maternal Mortality Rate**

3951. SHRI P.K. MAHESHWARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Maternal Mortality Rate has shown any improvement in the country during the last ten years;

(b) if so, the number of deaths of women per one lakh live births recorded during the above period;

(c) whether a large number of women are dying due to pregnancy-related complications than ever before;

(d) if so, the reasons therefor; and

(e) the steps taken by Government to provide adequate medical facilities to those women who are in need of such facilities?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (d) Estimates

of Maternal Mortality Rate at the National Level for the last ten years are not available. The Maternal Mortality Rate estimated by National Family Health Survey (NFHS) and Simple Registration System of Registrar General of India (RGI) for different periods are given below:—

| | 92-93 | 1997 | 1998 |
|---|---|---|---|
| RGI | NA | 408 | 407 |
| NFHS | 424* | - | 540* |

According to the survey itself the difference between the two NFHS surveys is not statistically significant.

Major causes of Maternal Mortality are Hemorrhages, Anaemia, Puerperal Complications, Obstructed Labour, Abortions and Toxaemia of Pregnancy.

(e) Maternal Health is an integral part of the Reproductive and Child Health Programme which aims at bringing down the maternal mortality and morbidity. Under this programme various interventions focused on reducing maternal deaths are being implemented. These are essential obstetric care; Emergency Obstetric Care; provision for referral transport for pregnant women with complication of pregnancy through panchayats; provision of drugs and equipment at first referral units; provision of contractual staff like additional Health Workers, staff nurses, doctors and anesthetist. Funds are also being provided for schemes like 24 hours delivery services at selected primary health centres and community health centres; training of dais in 142 districts with safe delivery rate of less then 30 per cent and holding of health camps in 102 districts with adverse health indicators.

**Purchases of Medicines for Medical Store Depots**

3952. SHRI VIJAY SINGH YADAV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that DG Health has permitted purchases of 18 crores rupees worth of medicines for Medical Store Depots;

(b) whether Government's attention has been drawn to the